

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i>		Application Number	10/672,921-Conf. #9463
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		Filing Date	September 26, 2003
		First Named Inventor	David WOODHOUSE
		Art Unit	2193
		Examiner Name	W. H. Wood
		Attorney Docket No.	0113715.00142US1

Please change the Correspondence Address for the above-identified application to:

The address associated with Customer Number: 68998

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

Applicant/Inventor
 Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 Attorney or agent of record. Registration Number 40,056.
 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature /Monica Grewal/Typed or Printed Name Monica GrewalDate April 9, 2007 Telephone (617) 526-6000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: April 9, 2007

Electronic Signature for Monica Grewal: /Monica Grewal/